

County: Bayfield
NORTHERN LIGHTS HEALTH CARE CENTER
706 BRATLEY DRIVE

Facility ID: 1430

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WASHBURN 54891 Phone: (715) 373-5621
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 75
Total Licensed Bed Capacity (12/31/03): 75
Number of Residents on 12/31/03: 64

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 69

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.4
Supp. Home Care-Personal Care	No					1 - 4 Years		32.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.1	More Than 4 Years		29.7
Day Services	No	Mental Illness (Org./Psy)	35.9	65 - 74	3.1			----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	29.7			85.9
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	53.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over	10.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	3.1		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	15.6	65 & Over	96.9	-----		
Transportation	No	Cerebrovascular	12.5		-----	RNs		15.8
Referral Service	No	Diabetes	7.8	Gender	%	LPNs		8.2
Other Services	Yes	Respiratory	1.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	21.9	Male	21.9	Aides, & Orderlies		
Mentally Ill	No		----	Female	78.1			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	2.3	137	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.6
Skilled Care	7	100.0	390	42	95.5	118	0	0.0	0	13	100.0	149	0	0.0	0	0	0.0	0	62	96.9
Intermediate	---	---	---	1	2.3	99	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.6
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		44	100.0		0	0.0		13	100.0		0	0.0		0	0.0		64	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	10.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.2	Bathing	0.0	89.1	10.9	64
Other Nursing Homes	7.0	Dressing	14.1	76.6	9.4	64
Acute Care Hospitals	76.7	Transferring	31.3	60.9	7.8	64
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	23.4	60.9	15.6	64
Rehabilitation Hospitals	1.2	Eating	46.9	48.4	4.7	64
Other Locations	3.5	*****				
Total Number of Admissions	86	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	7.8	Receiving Respiratory Care		18.8
Private Home/No Home Health	25.5	Occ/Freq. Incontinent of Bladder	65.6	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	23.4	Occ/Freq. Incontinent of Bowel	34.4	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		4.7
Acute Care Hospitals	11.7	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		40.6
Rehabilitation Hospitals	0.0					
Other Locations	7.4	Skin Care		Other Resident Characteristics		
Deaths	31.9	With Pressure Sores	4.7	Have Advance Directives		93.8
Total Number of Discharges		With Rashes	12.5	Medications		
(Including Deaths)	94			Receiving Psychoactive Drugs		64.1

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility	Ownership: Nonprofit	Bed Size: 50-99	Licensure: Skilled	All Facilities				
	%	Peer Group %	Ratio	Peer Group %	Ratio	Peer Group %	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.0	86.2	1.07	83.7	1.10	84.0	1.10	87.4	1.05
Current Residents from In-County	89.1	78.8	1.13	72.8	1.22	76.2	1.17	76.7	1.16
Admissions from In-County, Still Residing	23.3	24.5	0.95	22.7	1.03	22.2	1.05	19.6	1.18
Admissions/Average Daily Census	124.6	110.9	1.12	113.6	1.10	122.3	1.02	141.3	0.88
Discharges/Average Daily Census	136.2	116.1	1.17	115.9	1.18	124.3	1.10	142.5	0.96
Discharges To Private Residence/Average Daily Census	66.7	44.0	1.52	48.0	1.39	53.4	1.25	61.6	1.08
Residents Receiving Skilled Care	98.4	94.4	1.04	94.7	1.04	94.8	1.04	88.1	1.12
Residents Aged 65 and Older	96.9	96.1	1.01	93.1	1.04	93.5	1.04	87.8	1.10
Title 19 (Medicaid) Funded Residents	68.8	68.3	1.01	67.2	1.02	69.5	0.99	65.9	1.04
Private Pay Funded Residents	20.3	22.4	0.91	21.5	0.95	19.4	1.04	21.0	0.97
Developmentally Disabled Residents	0.0	0.6	0.00	0.7	0.00	0.6	0.00	6.5	0.00
Mentally Ill Residents	35.9	36.9	0.97	39.1	0.92	36.5	0.98	33.6	1.07
General Medical Service Residents	21.9	17.2	1.27	17.2	1.27	18.8	1.16	20.6	1.06
Impaired ADL (Mean)	44.1	48.1	0.92	46.1	0.95	46.9	0.94	49.4	0.89
Psychological Problems	64.1	57.5	1.11	58.7	1.09	58.4	1.10	57.4	1.12
Nursing Care Required (Mean)	10.2	6.8	1.49	6.7	1.51	7.2	1.42	7.3	1.39